

1. Apply for Membership Account with Civic Credit Union at [www.civicfcu.org](http://www.civicfcu.org)



[Status Center](#)

Start your application

Get ready to earn when you spend

**I'M READY**

finish application

Already a Member? [Add Accounts](#)

How to Join Civic  
Civic Federal Credit Union

**APPLYING MADE EASY.**  
Here are a few things you'll need to get started.

00:30

watch a quick tutorial

2. Member will need to complete their information and then select, "I am applying for an HSA account" Enter your local government unit number **10010. This code funds the \$25 to establish the account.**

Our name is Civic. What's yours?

Your information is always secure with us!

First Name

Middle Name

Last Name

Name Suffix

Email

Phone Number

Phone Type

Are you an LGFCU member?

Yes, I am an LGFCU member.

Are you applying for an HSA?

Yes, my local government unit number is:


next

3. Make ownership selection



## How would you like to set up this account?

Don't worry, you can change this later if you'd like.



single joint multiple

**Yes, I consent to e-sign and e-statements agreement**

If you do not want to receive the legal disclosures, agreements, notices and documents electronically you should exit from our online account application. If you do not consent to receive an electronic copy of the related documents, we will not be able to open the deposit account through our online account opening application.


[View Agreement](#)

next

Hi, let's talk!

4. Savings is already selected, the member can select other products if they want or they can move forward with just the membership account.


## Selected Accounts



**Civic Select Savings**  
This step-one savings account is automatically checked because the Select Savings Account establishes your membership at Civic! This account is required for all new members.


### Add More Accounts

CREDIT CARDS CHECKING SAVINGS CHOICE CERTIFICATES AUTO LOAN PERSONAL LOANS HELOC



**Civic Bonus Checking\***

- Bonus 0.50% APY with 20 debit card purchases per month
- Use ATMs worldwide, with fees reimbursed to your account
- Deposit checks remotely with Civic digital



**Civic Money Market†**

- Higher dividend rates than Select Savings
- Earn dividends of 2.10% APY when your balance stays above \$250
- Access your money with digital transfers or checks

next

back save for later

5. The member will be asked to enter their personal information

## Let's start with some basic information about you.

Your physical address is used to help verify your identity, while your mailing address is where you receive — well — mail! Let us know if these two addresses differ.

Scan your ID's barcode

Mailing Address

123 S Main St

ZIP

Holly Springs, NC 27540-9093

Same residential address

Social Security Number

000-02-3948

Date of Birth

01/01/1980

I confirm the number provided matches my taxpayer identification number.

**APPLIES TO U.S. CITIZEN OR U.S. RESIDENT ALIEN ONLY:** Taxpayer Identification Number: Under penalties of perjury, I certify by checking this box; the number provided on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and I am a U.S. citizen or other U.S.

issued to me) and I am a U.S. citizen or other U.S. person.

ID Type

Drivers License

State

North Carolina

ID Number

1236954

Issue Date

01/01/2008

Expiration Date

01/01/2026

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save for later

6. Enter Employer info



We're a member-focused Credit Union. Tell us what you do!



Sharing this info will help us serve you better.

Occupation

teacher

Industry

ABC Boards

Current Employer

ABC

next

7. Eligibility Info



Membership Eligibility



Select the membership eligibility option that best describes you.

I am a current employee of a local government agency (contract, part-time, seasonal and full-time employees are included).

I am retired from a local government agency.

I am a family member of a local government employee or retiree.

I am a volunteer with a local government agency.

next

8. Volunteer questions which they can either answer or skip

### Membership Volunteer Questions

Help us better understand your financial needs.

What emotions best describe how you feel about money?

Uneasy

Neutral

Confident

How do you make financial decisions?

Consult a partner

Do it Myself

Research Online


How do you feel about financial guidance?

Help! It takes a village

A little help would be nice

No thanks. I got it.


next

skip  Hi, let's talk!


9. Establish login information that they will HAVE to use when they sign back in to open the HSA account




### Now let's set up your Civic login.



You'll use this to check your accounts in the Civic app, or log in to your account on your favorite device.

Username 

ABC123

Password 

.....

Minimum of 10 characters and must contain:

- At least 1 lowercase letter
- At least 1 uppercase letter
- At least 1 number
- At least 1 special character

next

10. Disclosure agreement

## Account Agreements and Disclosures

services you are agreeing to these updated agreements and disclosures.

Review Disclosures

- Ebooklet
- Online and Mobile Banking Agreement
- Membership and Account Agreement
- Change in Terms Deposit Accounts

Clicking this checkbox and the "Accept" button below constitutes: that I, meaning any and all who are applying for primary or joint ownership of this account, understand that my account will be governed by the terms and conditions contained in the disclosures displayed above which I have read. Further, my clicking the "Accept" button constitutes, as legally binding as my signature. If I do not agree to the above I will click the "Decline" button.

accept

Hi, let's talk!

11. Answer Security Questions

Almost there, David! These questions will help us ensure the security of your info.

In which of the following counties have you ever lived or owned property?

- Fairfax, VA
- Montgomery, MD
- Loudon, MD
- Arlington, MD

Which of the following corporations have you ever been associated with?

- Verid, Inc
- Business, Inc
- Virtual Compliance, Inc
- Foo Bar, Inc
- None of the above

Based on your background, in what city is '123 Elm Street'?

- Reston
- Herndon
- Blacksburg
- Roanoke
- None of the above

Which of the following addresses have you ever been associated with?

- 10 Union Street
- 123 W 14th Street
- 800 Galloway Rd

Hi, let's talk!

next

12. Backup Withholding Selection

### Have you been notified by the IRS that you are subject to backup withholding?

No, I am not subject to backup withholding

By selecting this option, I certify that I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.

(This item does not apply for real estate transactions.)

Yes, I am subject to backup withholding

By selecting this option, I certify that I am subject to backup withholding. Certification Instructions: If you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return, you must check the box below. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

next

13. Dep Selection >> **MUST SELECT MAIL DEP (DO NOT MAIL CHECK, Code 10010 will notify CIVIC to FUND the account)**

### All right, David . Time to fund your new account!



You're almost done! Now it's time to add money to your new account. Please confirm the amount and then select your funding method.

**For new members also applying for an HSA, please select the mail option so we can cover your initial Civic Select Savings membership deposit.**

Civic Select Savings

\$25.00

Funding Total:

\$25.00

Mobile deposit  
Use the Civic App

Mail check  
2 days after receiving check

First Name

David

Last Name

Ortiz

Billing Address

1122 W Civic Street

Zip Code

Raleigh, NC

Card Number

Card Number

Card Expiration & CVV ⓘ

Month

Year

CVV

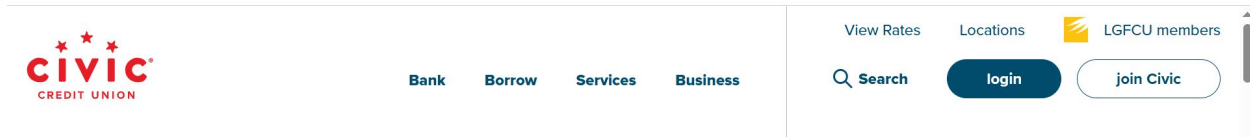
next

back

save for later

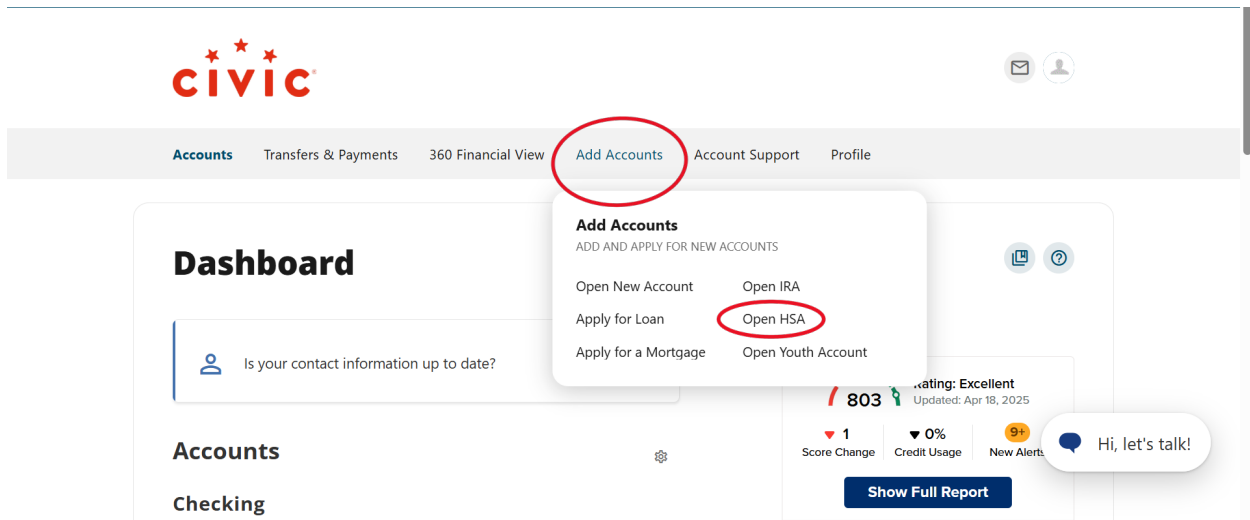
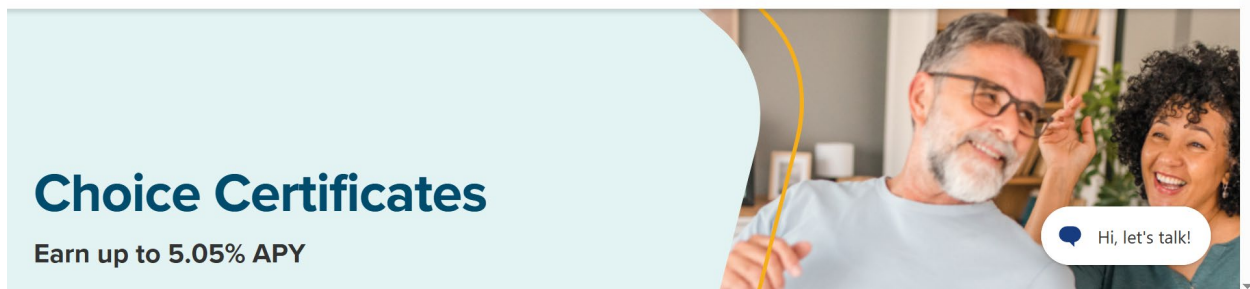
## PHASE 1- HOW TO OPEN A CIVIC HSA SELF-SERVICE

- Once the application is submitted the member will get a pending notification. The Digital Team will review, approve and fund the application. Turn around time is typically within 10 min.
- Once the application is approved the member will receive an "approval email". Once the membership account is approved.
- The member will sign into their Civic Account at [www.civicro.org](http://www.civicro.org) with the username and password they created, select "add new account" and open HSA.**

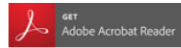


Login to Online Banking [Close](#)

Remember me [Forgot Password](#) | [Register](#)



17. From here the member will be routed to Ascensus to open their HSA.



Select the type of account you are opening, enter requested information, and click Continue.

Note: Enter the child's name if this is an ESA.

Required fields are indicated by an \*.

**\*Account Type:**

- Traditional IRA
- Traditional IRA - SEP Contribution
- Roth IRA
- Health Savings Account (HSA)

◀ Back      Continue ▶

18. Enter personal information

**Owner Information**

First Name:  \*

Middle Initial:

Last Name:  \*

Financial Organization Account Number:

Birth Date (mm/dd/yyyy):  \*

Social Security Number:  \*

Address Line 1:  \*

Address Line 2:

City:  \*

State:  \*

Zip Code:  \*

Country:  \*

Phone Number: (  )

Email:

**Owner's Marital Status:**

Not Married

Married

**Spousal Consent**

Spousal consent should be considered if either the financial organization or the residence of the IRA owner is located in a community or marital property state.

Spouse Signature Date:  (mm/dd/yyyy)

\* Indicates field is required.

Prev      Next

19. Enter beneficiary Information

Open a New Account

Owner Information > Beneficiary Information  
Step 2 of 3

**Beneficiary Information**

Enter up to 4 primary, 4 contingent beneficiaries in the fields below. To designate one primary beneficiary, enter 100 in the percent field. To designate multiple beneficiaries, enter the appropriate percent per beneficiary. Each total MUST equal 100%. If any of the primary beneficiaries you name qualify to receive money, then all of the money will be paid to the primary beneficiaries.

**Learn More**

Learn more about [naming beneficiaries](#).

If you are married, live in a community/marital property state and choose to designate a primary beneficiary other than your spouse, you should ask your spouse to consent to the beneficiary designation. To do this, [print the Beneficiary Designation Form](#). After you and your spouse complete and sign the form, mail a copy of the beneficiary designation and your account application to the financial organization, and retain copies for your records.

Click **Next** to skip naming beneficiaries at this time.



Primary Beneficiaries		Total Percent: <input type="text" value="0.0"/> %
<b>Beneficiary 1</b>		
Relationship: <input type="text" value="NON-SPOUSE"/> *	Name: <input type="text"/>	<input type="checkbox"/> Qualified Trust <a href="#">Qualified Trust Certification</a>
Percent: <input type="text"/>	Trust Name: <input type="text"/>	
<b>Personal Info or Beneficiary Named in Trust</b>		
First Name: <input type="text"/> *	<input type="checkbox"/> Copy owner's address	
Middle Initial: <input type="text"/>	Address: <input type="text"/>	
Last Name: <input type="text"/> *	City: <input type="text"/>	<input type="checkbox"/> Foreign
Birth Date: <input type="text"/> (mm/dd/yyyy)	State: <input type="text" value="NONE(NONE)"/>	
SSN: <input type="text"/>	Country: <input type="text" value="UNITED STATES"/>	
	Zip Code: <input type="text"/>	
<b>Beneficiary 2</b>		
Relationship: <input type="text" value="NON-SPOUSE"/> *	Name: <input type="text"/>	<input type="checkbox"/> Qualified Trust <a href="#">Qualified Trust Certification</a>
Percent: <input type="text"/>	Trust Name: <input type="text"/>	
<b>Personal Info or Beneficiary Named in Trust</b>		
First Name: <input type="text"/> *	<input type="checkbox"/> Copy owner's address	
Middle Initial: <input type="text"/>	Address: <input type="text"/>	
Last Name: <input type="text"/> *	City: <input type="text"/>	<input type="checkbox"/> Foreign
Birth Date: <input type="text"/> (mm/dd/yyyy)	State: <input type="text" value="NONE(NONE)"/>	
SSN: <input type="text"/>	Country: <input type="text" value="UNITED STATES"/>	
	Zip Code: <input type="text"/>	

Contingent Beneficiaries		Total Percent: <input type="text" value="0.0"/> %
<b>Beneficiary 1</b>		
Relationship: <input type="text" value="NON-SPOUSE"/> *	Name: <input type="text"/>	<input type="checkbox"/> Qualified Trust <a href="#">Qualified Trust Certification</a>
Percent: <input type="text"/>	Trust Name: <input type="text"/>	
<b>Personal Info or Beneficiary Named in Trust</b>		
First Name: <input type="text"/> *	<input type="checkbox"/> Copy owner's address	
Middle Initial: <input type="text"/>	Address: <input type="text"/>	
Last Name: <input type="text"/> *	City: <input type="text"/>	<input type="checkbox"/> Foreign
Birth Date: <input type="text"/> (mm/dd/yyyy)	State: <input type="text" value="NONE(NONE)"/>	
SSN: <input type="text"/>	Country: <input type="text" value="UNITED STATES"/>	
	Zip Code: <input type="text"/>	
<b>Beneficiary 2</b>		
Relationship: <input type="text" value="NON-SPOUSE"/> *	Name: <input type="text"/>	<input type="checkbox"/> Qualified Trust <a href="#">Qualified Trust Certification</a>
Percent: <input type="text"/>	Trust Name: <input type="text"/>	
<b>Personal Info or Beneficiary Named in Trust</b>		
First Name: <input type="text"/> *	<input type="checkbox"/> Copy owner's address	
Middle Initial: <input type="text"/>	Address: <input type="text"/>	
Last Name: <input type="text"/> *	City: <input type="text"/>	<input type="checkbox"/> Foreign
Birth Date: <input type="text"/> (mm/dd/yyyy)	State: <input type="text" value="NONE(NONE)"/>	
SSN: <input type="text"/>	Country: <input type="text" value="UNITED STATES"/>	
	Zip Code: <input type="text"/>	

\* Indicates field is required.

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Next

### Open a New Account

View/Print

[Owner Information](#) > [Beneficiary Information](#) > [Contribute Money](#)  
Step 3 of 3

Do you want to deposit money to your new account at this time?

Yes, contribute to my account.

No, submit application.

If you're not depositing money at this time, what investment do you intend to use when you do contribute to your account?

Select	Product Name	Term in Months	Min Balance	Rate	APY
<input type="radio"/>	ROTH IRA Savings	N/A	\$25.00	3.50%	3.50%
<input checked="" type="radio"/>	Health Savings Account	N/A	\$0.00	3.50%	3.50%
<input type="radio"/>	Traditional IRA	N/A	\$25.00	3.50%	3.50%
<input type="radio"/>	Beneficiary IRA	N/A	\$25.00	3.50%	3.50%
<input type="radio"/>	ROTH Conversion IRA	N/A	\$25.00	3.50%	3.50%
<input type="radio"/>	Beneficiary Roth IRA	N/A	\$25.00	3.50%	3.50%
<input type="radio"/>	Coverdell Savings	N/A	\$25.00	3.50%	3.50%

- These rates are effective as of 03/26/2025.
- Investments may change at any time and without warning. If the investment you select is not available at the time your document and/or check is received, you will be contacted to select another investment option.
- Penalties for early withdrawal may apply.
- Rates on variable rate accounts could change after account opening.
- The investment process is completed within two business days from the actual date of receipt. A confirmation will be sent to you once your account is opened.

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[Plan Management](#) | [Security](#) | [Terms and Conditions](#) | [Web Accessibility Notice](#)

## PHASE 1- HOW TO OPEN A CIVIC HSA SELF-SERVICE

### Review and Sign Step 1 of 3

#### A. Review your forms

Before you sign and submit your completed form(s) to CIVIC FCU A DIVISION OF LGFCU, we recommend you review it for accuracy. You may do this online or print a copy for review.

Note: If the address information entered for a beneficiary cannot fit in the address box of the application, only the beneficiary city and state will be printed.

You will need Adobe® Acrobat® Reader and a printer to be able to view and print the forms. If you do not have Adobe Acrobat Reader installed on your computer, you can obtain a free copy at: [adobe.com](http://adobe.com)

#### ATTACHMENTS:

 Application Form  
Agreement and Disclosure Packet

I acknowledge that I have reviewed the attachments identified above and agree to all terms and conditions in the documents prior to providing my signature and submitting to my financial organization for review.

#### B. Sign and print your forms

You have two options for submitting your forms to the financial organization:

1. Submit your forms online using an electronic signature. An electronic signature is a one-time event used only to sign your forms. [Click here](#) for more information about the Electronic Signature process.
2. Print, sign and deliver your forms directly to the financial organization.

Once you have read, understand and agree to the form(s) terms and conditions, indicate how you intend to submit your forms:

- I wish to sign my forms using the electronic signature process.  
 I wish to print, sign and deliver the forms to my financial organization.

Leave comment for financial organization staff (optional):

#### Owner's Approval Authorization

1. I understand that this transaction is subject to approval and I authorize the financial organization to make any inquiries they consider necessary to determine whether completing this transaction on my behalf is appropriate. This may include verification from account information services and credit reporting agencies.
2. If I am submitting this form electronically, I acknowledge that signing and dating the boxes below and clicking the **Submit Signature** button, along with my correct answers to the identity verification requests and questions immediately following this submission, constitute a legal substitute for my original signature in ink.

\*  \*  \* 04/24/2025 \*  ←


First Name

Middle

Last Name

Date

\* Indicates field is required.

 Adobe® Acrobat® Reader is required to view these files

Prev

### Open a New Account

View/Print  

Review and Sign > Print  
Step 2 of 3

#### Print or save your signed forms

Your electronically-signed forms have been submitted to CIVIC FCU A DIVISION OF LGFCU. Print and retain one copy of the forms for your records. To complete this transaction, you must click Next for identity verification.

ATTACHMENTS: 

[Application Form](#)  
[Agreement and Disclosure Packet](#)

I want my financial organization to send me a copy of the above forms.  
(You may also use this option if you are unable to print the above forms).

**Important!** This transaction is not complete until CIVIC FCU A DIVISION OF LGFCU processes your completed form(s). If applicable, your spouse may also need to sign the Spousal Consent form.

 Adobe® Acrobat® Reader is required to view these files

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Next

### Open a New Account



Review and Sign > Print > Verify Identity  
Step 3 of 3

#### Verify your identity

The final step to completing the online process is to verify your identity. [Click here](#) for more information about the identity verification process.

##### Permanent Address

Please enter or verify your birthdate and address:

Tanika S Floyd

Birthdate (mm/dd/yyyy):

Street Address:

Mailing Address:  
(if different than street address)

City:

State:

Zip Code:

Country:

##### Identity Verification Agreement

*I understand that by clicking I AGREE button immediately following this notice, I am providing "written instructions" to Ascensus, acting on behalf of CIVIC FCU A DIVISION OF LGFCU under the Fair Credit Reporting Act authorizing Ascensus acting on behalf of CIVIC FCU A DIVISION OF LGFCU to obtain information from my personal credit profile or other information from Experian. I authorize Ascensus acting on behalf of CIVIC FCU A DIVISION OF LGFCU to obtain such information solely to validate my identity.*

\* Indicates field is required.

Open a New Account

Review and Sign > Print > Verify Identity  
Step 3 of 3

Please answer the following questions to help us verify your identity.

**Question #1:** You may have opened an auto loan or auto lease in or around December 2023. Please select the dollar amount range in which your monthly auto loan or lease payment falls. If you have not had an auto loan or lease with any of these amount ranges now or in the past, please select 'NONE OF THE ABOVE/DOES NOT APPLY':

\$465 - \$564  
\$565 - \$664  
\$665 - \$764  
\$765 - \$864  
NONE OF THE ABOVE/DOES NOT APPLY

**Question #2:** Please select the county for the address you provided.

RANDOLPH  
FRANKLIN  
PAMLICO  
WILSON  
NONE OF THE ABOVE/DOES NOT APPLY


**Question #3:** Please select the model year of the vehicle you purchased or leased prior to March 2018 .

2018  
2019  
2020  
2021  
NONE OF THE ABOVE/DOES NOT APPLY

**Question #4:** Which of the following is a current or previous employer? If there is not a matched employer name, please select 'NONE OF THE ABOVE':

FOOTWHERE USA  
CELLULAR ONE  
LGFCU  
HARDY MACHINE INC  
NONE OF THE ABOVE/DOES NOT APPLY

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Verify your identity by answering all the questions

Open a New Account

Review and Sign > Print > Verify Identity  
Step 3 of 3

**Your transaction is now complete!**

Your completed form(s) was successfully validated and submitted to CIVIC FCU A DIVISION OF LGFCU. Your transaction will be processed within two business days.

- 20. Once the HSA account is opened, the member should see the account when accessing Online Banking, and a card will be issued and mailed to the member.
- 21. The Digital Branch team will reach out to the member to answer any questions and, if needed, will send the member a Direct Deposit form with their new HSA number, which can be provided to their employer.

Please call the Civic Experience Center at 844-772-4842 for assistance establishing membership and HSA.